

Request for placement on the Project List must be approved and signed by the Judicatory Head of the church. A cover letter with that approval may accompany multiple Project Profiles.



Signature / Date

Title

Return to: UMVIM SEJ sejinfo@umvim.org or fax 205-453-9481

International Project Description

Country _____ Date completed _____

Contact Person

Name _____ Title _____

Email _____ Phone _____

Skype Address _____ other _____

Types of on-going Mission Opportunities (indicate all using a ✓)

Construction

Church Parsonage School Clinic/Hospital Children Home/Orphanage

Latrines Boreholes Houses Other _____ Other _____

A list of needed skills, tools, materials will be provided to team leader prior to arrival.

No Yes

Medical Setting

Hospital Clinic Operating Room Dental Office Pharmacy Laboratory

Vision Other _____ Other _____

Medical Personnel Needed

Physician Physician Assistant Nurse Dentist Dental Hygienist/Assistant

Physical Therapist Optometrist Midwife Pharmacist

Medical Specialist Needed

Surgeon Anesthesiologist OBGYN Tropical Diseases Pediatrician

Radiologist Other _____ Other _____

Copy of Medical License Required? No Yes, should be sent _____ months prior to arrival

Procedure for government clearance of Medical Personnel will be provided Yes No

Following may be brought with team: Medicines Medical supplies Medical equipment List of needed meds and supplies be provided for items brought

Procedure for government clearance will be provided Yes No

Education

- Teaching – Schools Indicate: Preschool Primary Secondary Other _____
- Teaching – Churches (indicate: children youth young adults adults seniors)
- Mission Bible School (indicate: children youth young adults adults seniors)
- Church Leadership Training for Laity Leadership Training for Pastors
- Computer Training Business Skills and Practices

Other Opportunities

- Agricultural Disaster Response Other _____

List Priority Projects to be projected to be completed within 2-3 years. Please list on separate sheet include the following:

-Name of Project

-Location

-General Advance Number

-Brief Description

Host Information

Name of major airport _____ Location _____

Maximum number of team members _____

Can accommodate youth teams? No Yes, with adult/youth ratio of _____

Host on-site orientation available? No Yes, upon arrival

Type of housing available? Church Guesthouse Bed & Breakfast Hostel
 Hotel Homes Other _____

In-Country transportation arranged by host? Airport pick-up and drop-off Van Bus
 Rentals Public transportation

Local personnel available: Project Coordinator Translator Construction Supervisor
 Local Skilled Laborers Cooks Drivers Missionary Medical Personnel
 Principal/Teacher Pastor Other _____

Administrative/Coordination Fee No Yes, the amount is \$ _____

Meals will be provided? No Yes, prepared on-site at lodging Cooking facility available for team to prepare meals

A list of fees for housing, food, transportation, local personnel, coordination will be provided to team leaders prior to arrival. No Yes

Cultural Information

A list of guidelines regarding dress, offensive habits, and other information for cultural sensitivity will be provided to team leaders prior to arrival. No Yes

Volunteer Team Expectations Policy/Guidelines will be provided to team leaders prior to arrival No Yes